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Some

COVER LETTER

TO: Amendment Sec Division of Cor				•••	
NAME OF CORPO	PRATION: GOLD'S SHRIME	CORP			
DOCUMENT NUM	IBER: P20000002437				
The enclosed Article	s of Amendment and fee are su	ibmitted for filing.			
Please return all corr	espondence concerning this ma	atter to the following:			
	Manuel Castro				
		Name of Contact Person	· · · · · · · · · · · · · · · · · · ·		
	GOLD'S SHRIMP CORP				
		Firm/ Company			
	25787 SW 127 PL				
		Address			
	Homestead, FL 33032				
		City/ State and Zip Code			
	mannyc57@icloud.com				
	E-mail address: (to be u	sed for future annual report	notification)		
For further information	on concerning this matter, plea	se call:			
Manuel Castro		786	7246573	; o : r	-
Name	of Contact Person	Area Coo	le & Daytime Telephone Number	- 10 iii	
Enclosed is a check f	or the following amount made	payable to the Florida Depa	rtment of State:	(7) (7) (7)	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	ENT: 12	
An Div P.C	niling Address mendment Section vision of Corporations D. Box 6327 Hahassee, FL 32314	Amend Division The Ce	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

GOLD'S SHRIMP CORP

(Name o	of Corporation as curren	tly filed with the Florida Dept. of State)
P20000002437		· . ~
	(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, thi	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:	
	Corp," "Inc," or "Co".	The new "company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		25787 SW 127 PL
		Homestead, FL 33032
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		25787 SW 127 PL
		Homestead, FL 33032
D. If amending the registered agent ar new registered agent and/or the new		
Name of New Registered Agent	Manuel Castro	-
	25787 SW 127 PL	
	(Florida s	treet address)
New Registered Office Address:	Homestead	, Florida
		(City) (Zip Code)
New Registered Agent's Signature, if c		nt; with and accept the obligations of the position.
Thereby accept the appointment as regist	erea agera. Tang jamihan	with and accept the obligations of the position.
	- traut	
	Signature of New	Registered Agent, if changing
Check if applicable	1 / -	

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Example:

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
_X Add	SY	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	P	OTTO URDANETA	11360 SW 46 DR, #5206
Add			Miramar, FL 33025
X Remove			11360 SW 46 DR, #5206
2) Change	<u>s</u>	GERARADO LANDAETA	Miramar, FL 33025
Add			The second secon
$\frac{X}{X}$ Remove 3) $\frac{X}{X}$ Change	P	MANUEL CASTRO	25787 SW 127 PL
Add			Homestead, FL 33032
Remove			
4) X Change	T	GUILLEMO LANDAETA	25787 SW 127 PL
Add			Homestead, FL 33032
Remove			
5) Change			
		-	
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
<u></u>	
	
If an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	

The date of each amendment(s date this document was signed.) adoption:	, if other than the
· ·		
Effective date <u>if applicable</u> : _	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this date. Department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder acti	ion and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendments sufficient for approval.	(s)
	approved by the shareholders through voting groups. The following statem for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
09/10/20 Dated Signature	a director, president or other officer – if directors or officers have not been	
sele	cted, by an incorporator—if in the hands of a receiver, trustee, or other couplinted fiduciary by that fiduciary)	
	Manuel Castro	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	